

## State of South Dakota Statement of Financial Interest **Elected Official**

File statement within 15 days after taking your oath of office in the office where your nominating petition or convention nomination certification was filed. Please read information on reverse side before completing this form.

| ( )   | ***********           | STATE   | ;********         |
|---|-----------------------|---|-------------------|
| 1. Name <u>Jerald</u>   | <u> </u>              | Lange<br>Point Dr. Madison  |                   |
| 2. Address 1990 Sto   | ney                   | Point Dr. Madison   | <u>u</u>          |
| 3. Elected Office House   |                       |   |                   |
| If there is no change in your financial interest since t sign and return.   |                       |   | lease             |
| Date: /-//-05 (Signed)_   |                       | erald I Lange   | <del></del>       |
| If there are changes, please complete the following:  |                       |   |                   |
| 4. What is your occupation/profession?  | -                     |   | <del></del>       |
| 5. List any enterprise which accounted for more that percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at ho gross income in the preceding calendar year. Identify who receives the income from each enterprise. | me)                   | What is the nature of your immediate family's asso<br>with each? The value of the financial interest need<br>be reported. | iciation<br>I not |
|   |                       | 31.0  |                   |
| 6. List any enterprise in which you, your spouse or rechildren living at home control more than ten percent the capital or stock. Identify who has the ownership interest in each enterprise.   | t of                  | What is the nature of your immediate family's assowith each?  | ciation           |
|   |                       | Filed this JOHA   | day (             |
| State of South Dakota ) SS.   |                       | Verification Chis Polso SECRETARY OF STA  | 之れれ               |
| County of)  |                       | TARY OF STA   | TE                |
| I have reviewed paragraphs 1 through 6 of the Inform<br>Statement of Financial Interest and certify that the in<br>my financial interests for the preceding calendar year   | nformation rep<br>ar. | ported is a complete, true and accurate represental   | lion of           |
| Sworn to before me this day of  | (Signed)<br>, 19_     | •   |                   |
| (Seal)  |                       |   |                   |
| Revised 1997  |                       | Officer Administerion My commission expires:  | ıy Oaul           |

## State of South Dakota Statement of Financial Interest Candidate for Public Office

RECEIVED

File statement in the office where your nominating petition or convention nomination certification was filed.

| Please read information on reverse side before comple  | ting this form.   |
|--|---|
| 1. Name Gerald F.  |   |
| 1. Name Gerald F.  2. Address 1990 Stones  3. Office Sought Representa   | 1. Point Dr   |
| 3. Office Sought Representa  | tive  |
| 4. What is your occupation/profession?   |   |
| 5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise. | What is the nature of your immediate family's associatio with each? The value of the financial interest need not be reported. |
| Rent from<br>a farm  | owner   |
| a farm   | ų i   |
| V  |   |
|  |   |
| percent of the capital or stock. Identify who has the ownership interest in each enterprise.   | What is the nature of your immediate family's association with each?  |
|  | Filed this day of   |
|  | May DY  |
|  | . Chi Nelson  |
| State of South Dakota, )   | SECRETARY OF STATE  |
| county of Hughw ss.  | Verification  |
| have reviewed paragraphs 1 through 6 of the Information Restatement of Financial Interest and certify that the information my financial interests for the preceding calendar year.  (Signed)  (Signed)   |   |
| (Seal)   | Officer Administering Oath  |
| outrad 1007  | My commission expires: (4/17 - 07   |